

01-0402

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Please type a plus sign (+) inside this box [+]

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 004860.P2667

(maximum 12 characters)

First Named Inventor Steven P. Jobs, et. al.Title: COMPUTER CONTROLLED DISPLAY DEVICEExpress Mail Label No. EL627465962USJ1050 U.S. PTO
10/035417
11/08/01ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. X **Fee Transmittal Form (e.g., PTO/SB/17)**
(Submit an original, and a duplicate for fee processing)
2. **Applicant Claims Small Entity Status. (37 CFR 1.27)**
3. X **Specification (Total Pages 145)**
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table,
or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. X **Drawings(s) (35 USC 113) (Total Sheets 80)**
5. X **Oath or Declaration (Total Pages 7)**
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
 - c. X Unsigned.
6. **Application Data Sheet. (37 CFR 1.76)**
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper

ACCOMPANYING APPLICATION PARTS

9. ☐ **Assignment Papers (cover sheet & documents(s))**
10. ☐ a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
10. ☐ b. Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ a. Information Disclosure Statement (IDS)/PTO-1449
12. ☐ b. Copies of IDS Citations
13. ☐ **Preliminary Amendment**
14. ☒ **Return Receipt Postcard (MPEP 503) (Should be specifically itemized)**
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ **Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.**
17. ☒ Other: Copy of postcard with express mail label and certificate of mailing

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
 Of Prior Application No.: _____ Examiner _____ Group Art Unit _____
 (which is a ☐ continuation/ ☐ divisional/ ☐ CIP of prior application no. _____)
 which is a ☐ continuation/ ☐ divisional/ ☐ CIP of prior application no. _____ (List entire chain of priority)

Applicant(s): Also include a Preliminary Amendment to amend the specification to claim priority.
For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____ (or a copy of which is attached).

19. Correspondence Address

☐ Customer Number or Bar Code Label _____
 or _____ (Insert Customer No. or Attach Bar Code Label here)
☒ Correspondence Address Below

NAME James C. Scheller
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard
Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Name (PRINT/TYPE): James C. Scheller Registration No.: 31,195

Signature:  Date: 11/8/2001

PTO/SB/35(11-00)

Approved for use through 10/31/2002. OMB 0651-0031

FEE TRANSMITTAL FOR FY 2002**TOTAL AMOUNT OF PAYMENT (\$)** 4,520.00**Complete if Known:****Application No.** Not Yet Assigned**Filing Date** Herewith**First Named Inventor** Steven P. Jobs, et al.**Group Art Unit** Unassigned**Examiner Name** Unassigned**Attorney Docket No.** 004860.P2667**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666**Deposit Account Name** _____☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed: ☒ Check
☐ Money Order
☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
101	740	201	370	Utility application filing fee	<u>740.00</u>
106	330	206	165	Design application filing fee	_____
107	510	207	255	Plant filing fee	_____
108	740	208	370	Reissue filing fee	_____
114	160	214	80	Provisional application filing fee	_____

SUBTOTAL (1) \$ 740.00**2. EXTRA CLAIM FEES**

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>188</u>	- 20** = <u>168</u>	<input checked="" type="checkbox"/> <u>18.00</u>	= <u>3024.00</u>
Independent Claims	<u>12</u>	- 3** = <u>9</u>	<input checked="" type="checkbox"/> <u>84.00</u>	= <u>756.00</u>
Multiple Dependent				= _____

****Or number previously paid, if greater; For Reissues, see below.**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 3780.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
099	8,800	099	8,800	Request for inter parties reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	For filing a submission after final rejection (see 37 CFR 1.129(a))	
148	110	248	55	Statutory Disclaimer	
149	740	249	370	For each additional invention to be examined (see 37 CFR 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
195	300	195	300	Publication fee for early, voluntary, or normal pub.	
196	300	196	300	Publication fee for republication	
194	130	194	130	Request for voluntary publication or republication	
098	130	098	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
091	1,280	091	1,280	Acceptance of unintentionally delayed claim for priority	

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$ 0

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: James C. Scheller

Signature: 

Date: 11/8/2001

Reg. Number: 31,195

Telephone Number: (408) 720-8300

EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EL 627 465 962 US

Date of Deposit: November 8, 2001

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Beverly Kehoe Shea
(Typed or printed name of person mailing paper or fee)

Beverly Kehoe Shea
(Signature of person mailing paper or fee)

November 8, 2001
(Date signed)

Serial/Patent No.: Not Yet Assigned

Filing/Issue Date: Herewith

Client: Apple Computer, Inc.

Title: COMPUTER CONTROLLED DISPLAY DEVICE

BSTZ File No.: 004860.P2667

Atty/Secty Initials: JCS/JET/mmp/bks

Date Mailed: November 8, 2001

Docket Due Date: ***

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|---|--|--|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No. <u>EL627465962US</u> | <input checked="" type="checkbox"/> Check No. <u>45928</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time | Amt: <u>4520.00</u> |
| <input checked="" type="checkbox"/> Application - Utility (<u>145</u> pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO 149 (____ pgs.) | <input type="checkbox"/> Check No. _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) | <input type="checkbox"/> Issue Fee Transmittal | Amt: _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input type="checkbox"/> Preliminary Amendment (____ pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input checked="" type="checkbox"/> Declaration & POA (<u>7</u> pgs.) (<u>unsigned</u>) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.) | <input checked="" type="checkbox"/> Transmittal Letter, in duplicate | |
| <input checked="" type="checkbox"/> Drawings: <u>80</u> # of sheets includes <u>126</u> figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |

☒ Other: Copy of postcard with express mail number and certificate of mailing.